Amendments to the Claims

1. (Cancelled)

2. (Cancelled)

3. (Currently amended) A method for assessing ~~diagnosing~~ the genetic risk for hypertension in a human male subject, the method comprising the following steps (i) to (iii):

(i) analyzing the ~~two or more~~ polymorphisms ~~selected from the group consisting of the following~~ (1) to (3) ~~(4)~~ in a nucleic acid sample from the human male subject, the polymorphisms comprising:

(1) a polymorphism at the base number position 1648 of the glycoprotein Ia gene;

(2) a polymorphism at the base number position 190 of the chemokine receptor 2 gene; and

(3) a polymorphism at the base number position 1100 of the aplipoprotein C-III gene; ~~and~~

~~(4) a polymorphism at the base number position 825 of G protein β3 subunit gene.~~

(ii) determining, based on the information about polymorphism which was obtained in the step (i), the genotype in the nucleic acid sample from the human male subject; and

(iii) assessing, based on the genotype determined, a genetic risk for hypertension in the human male subject.

4. – 8. (Cancelled)

9. (Currently Amended) A method for assessing the genetic risk for hypertension in a human male subject, the method comprising the following steps (i) to (iii):

(i) analyzing the polymorphisms (1) to (3) in a nucleic acid sample from the human male subject, the polymorphisms comprising:

(1) a polymorphism at the base number position 1648 of the glycoprotein Ia (GpIa) gene, wherein the polymorphism is GpIa A1648G ;

(2) a polymorphism at the base number position 190 of the chemokine receptor 2 (CCR2) gene, wherein the polymorphism is CCR2 G190A; and

(3) a polymorphism at the base number position 1100 of the aplipoprotein C-III (apo CIII) gene, wherein the polymorphism is apoCIII C1100T; and

(ii) determining, based on the information about polymorphism which was obtained in the step (i), the genotype in the nucleic acid sample from the human male subject; and

(iii) assessing, based on the genotype determined ~~determine~~, a genetic risk for hypertension in the human male subject.